# Campaign Finance Tracking Form for Local Election Officials

Call OCPF with campaign finance questions at 617-979-8300 Candidate or Committee Pre-Preliminary Pre-Election 30-Day Year-End Report: Organization / Providing Materials / Notification \* Organizational form provided to candidate or committee (M101, M101BQ, M101PC) Campaign finance report form provided to candidate or committee (M102) Summary of the campaign finance law provided (OCPF guide booklet) Filing notice (includes reporting dates, due dates and language concerning late fines) Pre-Preliminary \_\_\_Pre-Election \_\_\_30-Day \_\_\_Year-end \*All forms, guides and notices can be delivered by e-mail **Inspecting Reports** The campaign finance law requires local election officials to "inspect" M102 and M102-0 campaign finance reports within 30 days of a due date. Correct dates for the relevant reporting period Signatures Positive ending balance If the M 102-9' form is filed, the candidate does not have a committees and has not received any contributions, made any expenditures or incurred any obligations during the reporting period, and does not have a campaign fund in existence. Contributions/(Monetary receipts and in-kind contributions) Names and Addresses for contributions of more than \$50 Occupation and Employer for contributions of \$200 or more No contributions from corporations, business partnerships, LLCs or LLPs No contributions from individuals for more than \$1,000 (see OCPF's limits chart for other limits) Expenditures Vendor Names and Addresses for expenditures of more than \$50 Purpose information is disclosed Reimbursements form (R-1s) filed for reimbursements

Date of Inspection October 24, 2019

Pamelo Pary



Signed under the penalties of perjury:

# Form CPF M 102: Campaign Finance Report

**Municipal Form** 

Office of Campaign and Political Finance

OCT 2 4 2019

of Massachusetts File with: City or Town Clerk or Election Commission **Ending Date:** 10/18/19 Fill in Reporting Period dates: **Beginning Date:** Type of Report: (Check one) X 8th day preceding election 8th day preceding preliminary 30 day after election year-end report dissolution Alexander E. Jarrett Committee to Elect Alex Jarrett Candidate Full Name (if applicable) Committee Name City Councilor, Northampton, Ward 5 **Brett Constantine** Office Sought and District Name of Committee Treasurer 8 High St, Florence, MA 01062 52 Willow St, Florence, MA 01062 Residential Address Committee Mailing Address alex@alexjarrett.com E-mail: E-mail: brett.constantine@gmail.com Phone # (optional): Phone # (optional): 413-387-9678 **SUMMARY BALANCE INFORMATION:** Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) 3170.00 Line 3: Subtotal (line 1 plus line 2) 3170.00 1281.33 Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) 1888.67 Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) 247.52 Line 8: Name of bank(s) used: Florence Bank Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Date: 10/24/19 Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report. **Candidate without Committee** I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign

finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the

campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

\_(Candidate's signature)

Date: 10/24/19

### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

D. C. D	Name and Residential Address	Occupation & Employer (for contributions of \$200 or more)	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 of more)
5/26/19	Lisa Baskin, 395 Audubon Rd, Leeds, MA 01035	100.00	
9/30/19	Lisa Baskin, 395 Audubon Rd, Leeds, MA 01035	50.00	
6/24/19	Patrick Boughan, 95 Straw Ave, Florence, MA 01062	50.00	
10/1/19	Patrick Boughan, 9 Harold St, Florence, MA 01062	25.00	
9/5/19	Oona Coy, 1 Ventures Field Rd, Northampton, MA 01060	100.00	
9/8/19	Elliot Fratkin, 24 Massasoit St, Northampton, MA 01062	100.00	
9/8/19	Alex Ghiselin, 164 Riverside Dr, Bay State Village, MA 01062	100.00	
7/21/19	Spartan Giordano, 10 Charles St, Greenfield, MA 01301	100.00	
6/25/19	Sharon Deal, 57 Baker Hill Rd, Florence, MA 01062	50.00	
5/6/19	Alex JarrettLOAN, 8 High St, Florence, MA 01062	100.00	LOAN from candidate
5/21/19	Alex JarrettLOAN, 8 High St, Florence, MA 01062	75.00	LOAN from candidate
5/29/19	Tammi Kozuch, 6 High St, Florence, MA 01062	125.00	
Line 9: Total Rece	eipts over \$50 (or listed above)		
Line 10: Total Rec	eipts \$50 and under* (not listed above)		
* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 s			← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

# **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/29/19	Matthew Kozuc <b>k</b> , 6 High St, Florence, MA 01062	125.00	
6/26/19	Claire Morenon, 24 Willow St, Florence, MA 01062	100.00	
9/9/19	Susan Rees, 320 Riverside Dr, Florence, MA 01062	100.00	
5/24/19	John Sinton, 124 Willow St, Florence, MA 01062	100.00	
8/1/19	John E Stevens, 399 Bridge Rd Apt H, Florence, MA 01062	75.00	
8/1/19	Nicole E Stevens, 399 Bridge Rd Apt H, Florence, MA 01062	75.00	
9/13/19	Kristen Sykes, 26 Liberty St, Florence, MA 01062	100.00	
5/7/19	Susan Voss, 89 Ridgewood Terr, Northampton, MA 01060	125.00	
5/7/19	Paul Voss, 89 Ridgewood Terr, Northampton, MA 01060		
5/31/19	Ruth Woodring, 8 High St, Florence, MA 01062	100.00	
line O. Tatal Page	ipts over \$50 (or listed above)	1950	
	eipts \$50 and under* (not listed above)	1220	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3170 ←	Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9/30/19	ActBlue	366 Summer St, Somerville, MA 02144-3132	Refund of contribution from Jordana Amato, initiated by campaign, processed by ActBlue	40.00
9/30/19	ActBlue	366 Summer St, Somerville, MA 02144-3132	Refund of contribution from Kathleen Hulton, initiated by campaign, processed by ActBlue	40.00
7/12/19	Collective Copies	93 Main St, Florence, MA 01062	5 orders of signs & fliers	226.5
8/8/19	Collective Copies	93 Main St, Florence, MA 01062	white card fliers	65.34
9/23/19	Collective Copies	93 Main St, Florence, MA 01062	3 orders of signs & fliers	99.77
10/12/19	Collective Copies	93 Main St, Florence, MA 01062	3 orders of signs & fliers	794.22
5/21/19	Florence Civic & Business Association	90 Park St/P.O. Box 60201, Florence, MA 01062	Rental of venue for launch party (paid directly by the candidate; see also Liabilities)	75.00
6/26/19	Alex Jarrett	8 High St, Florence, MA 01062	(see also Reimbursement form) supplies for campaign launch party	68.86
6/26/19	Ernest Johnson	75 Forbes Ave, Northampton, MA 01060	music/band at campaign launch party	100.00
	70.746	Line 12: Total Expenditures ov	ver \$50 (or listed above)	1171.85
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	109.48
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	1281.33

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

# **SCHEDULE B: EXPENDITURES (continued)**

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
		Line 12: Expenditures over	\$50 (or listed above)	
		Line 13: Expenditures \$50 ar	nd under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
10/14/19	Seth Gregory	18 Northern Ave, Northampton, MA 01060	design of flyers and signs	250.00
		Line 15: In-Kind Contributions	s over \$50 (or listed above)	250.00
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	64.24
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	314.24

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

# **SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
5/6/19	Alex Jarrett	8 High St, Florence, MA 01062	Loan from candidate; Funding required to open bank account	100.00
5/21/19	Alex Jarrett	8 High St, Florence, MA 01062	Loan from candidate; Booking of Florence Civic Center for launch party	75.00
10/11/19	Collective Copies	93 Main St, Florence, MA 01062	flierswill be paid on monthly statement	72.52



# Form CPF R 1: Itemization of Reimbursements Office of Campaign and Political Finance

Office of Campaign and Political Finance One Ashburton Place, Room 411 Boston, MA 02108 (617) 979-8300

Please itemize any reimbursements by detailing the date, payee, address, purpose and amount for each expenditure made by the person being reimbursed. The total amount reimbursed to the individual (which must be by committee check) should be the same as the amount shown on the reimbursement form.

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		Dat	e of Reimbursement: 6/26/19	
Name of Individ	dual Being Reimbursed: Alex Jarret	tt		
Committee Nan	ne: Committee	e to Elect Alex Jarrett		
CPF ID Number (if applicable): Telephone Number (optional): 4133879				133879678
Date Paid	Vendor Name	IZE EXPENDITURES IN EXCE	T	
Date Paid		Vendor Address	Purpose of Expenditure	Amount
6/24/19	Deals & Steals	1 Pearl St, Northampton, MA 01060	compostable bowls & spoons and apple juice for launch part	ty 31.58
6/24/19	River Valley Co-op	330 North King St, Northampton, MA 01060	compostable cups for launch party	15.88
6/24/19	Evolution Cafe	22 Chestnut St, Florence, MA 01062	vegan ice cream for launch pa	21.40
	(Include items listed on Page 2) —	Line 1: Expenditures in excess o	of \$50 (itemized above):	68.86
		Line 2: Expenditures \$50 or und	er (not itemized):	
		Line 3: TOTAL AMOUNT RE	EIMBURSED:	68.86
Signed under tl	he penalties of perjury:	S (Treasurer)	Date:	10/24/19
	Signature of Cand	idate / Treasurer		